



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII
STATE ETHICS COMMISSION

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FERRY
SN1

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Matsuura	Scott	A.	(808) 927-0619
MAILING ADDRESS (Street)			FAX
21 Hapua Place			(808) 244-6948
(City)	(State)	(Zip Code)	
Wailuku	Hawaii	96793	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
SPJ Consulting, LLC			(808) 927-0619
MAILING ADDRESS (Street)			FAX
45-248A Pahikaua Place			
(City)	(State)	(Zip Code)	
Kaneohe	Hawaii	96744	

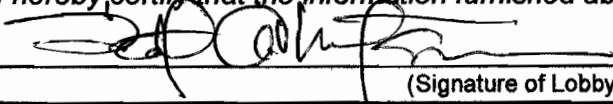
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
HAWAII SUPERFERRY, INC.		808 531 7400
MAILING ADDRESS (Street)		FAX
PIER 19 FERRY TERMINAL		808 531 7410
(City)	(State)	(Zip Code)
HONOLULU	HI	96817
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
JULIE LOO		808 531 7400
MAILING ADDRESS (Street)		FAX
SAME AS ABOVE		808 531 7410
(City)	(State)	(Zip Code)

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	<input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

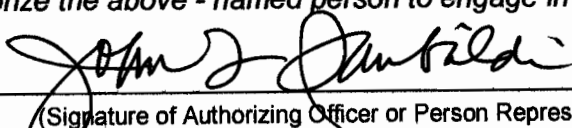
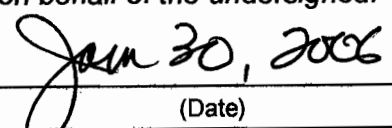
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
JOHN L. GARIBALDI		PRESIDENT & CEO	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
HAWAII SUPERFERRY, INC.		808 531 7400	
MAILING ADDRESS (Street)		FAX	
PIER 19 FERRY TERMINAL		808 531 7410	
(City)	(State)	(Zip Code)	
HONOLULU	HI	96817	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
			
(Signature of Authorizing Officer or Person Represented)		(Date)	
		Jan 30, 2006	